

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		65918	11/20/00
FORMALITY REVIEW			1-7-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	0
14	✓
15	✓
16	✓
17	✓
18	0
19	-
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21	-
22	✓
23	✓
24	0
25	0
26	✓
27	0
28	-
29	-
30	>
31	✓
32	✓
33	✓
34	0
35	✓
36	-
37	-
38	-
39	-
40	-
41	✓
42	✓
43	0
44	0
45	✓
46	✓
47	✓
48	=
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Claim	Date
Final Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here